

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010397

FILED
May 01, 2005
Secretary of State

Entity Name: ATLANTIC REAL ESTATE INVESTMENTS, LLC

Current Principal Place of Business:

9725 NAPOLI WOODS LN
DELRAY BEACH, FL 33446

New Principal Place of Business:

Current Mailing Address:

9725 NAPOLI WOODS LN
DELRAY BEACH, FL 33446

New Mailing Address:

FEI Number: 20-0456279 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MALHOTRA, THRITY
9725 NAPOLI WOODS LN
DELRAY BEACH, FL 33446 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: MALHOTRA, THRITY
Address: 9725 NAPOLI WOODS LN
City-St-Zip: DELRAY BEACH, FL 33446

Title: MGR () Delete
Name: MALHOTRA, CYRUS
Address: 9725 NAPOLI WOODS LN
City-St-Zip: DELRAY BEACH, FL 33446

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: M () Change (X) Addition
Name: MALHOTRA, SURINDAR
Address: 9725 NAPOLI WOODS LN
City-St-Zip: DELRAY BEACH, FL 33446

Title: M () Change (X) Addition
Name: MALHOTRA, GEETANJALI
Address: 9725 NAPOLI WOODS LN
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THRITY MALHOTRA

MGRM

05/01/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date